

REQUEST FOR
SPECIAL MAILING
JOINT SERVICES TRANSCRIPT

OFFICIAL

JST

OFFICIAL

Complete Form, Provide Signature, then E-Mail/ Fax/ Mail to:

Commanding Officer (RO)
USCG Institute
5900 SW 64th St., Room 228
Oklahoma City, OK 73169-6991

FAX: (405) 954-7249

E-mail: CGI-PF-ed_transcripts@uscg.mil

INFO on JST and other Voluntary Education Programs go to web site: <https://jst.doded.mil>

Signature (NOTE: Must have signature in order to process!)

Date

PRIVACY ACT INFORMATION - PLEASE TYPE OR PRINT LEGIBLY

"For Official Use Only - Privacy Sensitive - Any misuse or unauthorized disclosure may result in both civil and criminal penalties."

1. NAME <small>(Last, First, Middle Initial) Name on Military Records</small>		2. SSN <small>(Last FOUR of SSN Only)</small>	
3. RATE / RANK		5. BRANCH OF SERVICE <small>(Check One)</small>	<input type="checkbox"/> Coast Guard <input type="checkbox"/>
6. Currently on Active Duty?		7. How do we CONTACT you?	
<input type="checkbox"/> YES <input type="checkbox"/> NO		Work Phone: <small>(DSN if available)</small>	
		Alternate Phone:	
		E-Mail:	
8. PERSONAL <small>(Unofficial) COPY Go to the following Web Site to generate and print your personal copy of the JST. https://jst.doded.mil</small>	9 SEND OFFICIAL JST TO THE FOLLOWING LOCATION. No Abbreviations Please		
	Name:		
	Address:		
	City, State:		
	Zip Code:		

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY	10 USC, Section 4302
PRINCIPAL PURPOSES	To enable the JST system to access its computerized files, retrieve data, and produce a transcript for forwarding to educational institutions designated by the individual.
DISCLOSURE	Voluntary. Failure to provide required information will complicate, delay, and/or prevent administrative actions needed to produce the Transcript and forward it to desired educational institution(s).
ELIGIBLE	1. Active Duty and Reserve Coast Guard 2. Coast Guard Veterans